SECTION 3

TARGETED CASE MANAGEMENT TIME SURVEY

Table of Contents

Subject	Page
When to Code Time to Targeted Case	T.3-1-1
Management (TCM)	
Medi-Cal Administrative Activities (MAA)	T.3-2-1
Outreach A and MAA Outreach B1 and B2	
Facilitating Medi-Cal Application (Eligibility	T.3-3-1
Intake)	
MAA/TCM Coordination And Claims	T.3-4-1
Administration	
How to Code Exercise Instructions	T.3-5-1
MAA/TCM Time Survey – How to Code Exercise	T.3-6-1
MAA/TCM Time Survey How to Code Exercise	T.3-7-1
Answer Key	

WHEN TO CODE TIME TO TARGETED CASE MANAGEMENT

OVERVIEW

The TCM time survey documents <u>all</u> costs related to the direct provision of TCM services. These costs are then incorporated into the TCM Cost Report, which is used to establish the TCM encounter rate. It is important that all persons participating in the time survey clearly understand which activities they perform that should be coded to TCM.

DHS' DEFINITION OF ACTIVITIES TO BE CODED TO TCM

Two of the sections contained in this manual, provide guidance on which activities to code to TCM during the time survey. The first section, "Targeted Case Management Services," T.2-1-1 to T.2-1-2, describes the service components of TCM. The second section, "TCM Rate Contents, T.4-4-1 to T.4-4-2," describes the activities whose costs are to be included in the TCM rate. Both of these sections are attached.

Descriptions of the service components of TCM and the activities to be included in the TCM rate provide only a starting point; it is not possible to anticipate all activities related to providing TCM services. Persons completing the time survey must be conscious of whether <u>each</u> of their activities relates to the TCM program. They must recognize that what is defined as a TCM-related activity for time survey purposes goes far beyond what is defined as a TCM encounter. These types of activities are identified below under "Examples of Activities to be Coded to TCM."

Please note that some of the activities listed in the "TCM Rate Contents" section cannot be performed by Case Managers or their support staff and must <u>not</u> be coded to TCM by these persons. These activities may be claimed through MAA as MAA/TCM Coordination and Claims Administration.

EXAMPLES OF ACTIVITIES TO BE CODED TO TCM

The following list is not all-inclusive. Although the activities have been organized according to their TCM Service Components, many of the activities apply to more than one component.

TCM-related activities may vary by program. It is recommended that TCM staff discuss their typical activities with their TCM Coordinator prior to conducting a time survey to determine which activities should be coded to TCM.

Assessment, Development of a Written Service Plan, and Periodic Review

- Reviewing client histories, formal assessments, and other documents in preparation for performing a TCM assessment and developing a service plan.
- Reviewing case notes and/or gathering information and materials prior to a case manager visit with a TCM client. Preparing and mailing information to clients or providers following a TCM visit.
- Interviewing TCM clients regarding their case management needs, resources, and concerns.
- Travel time related to performing TCM duties, including travel to and from a client's home for a TCM visit, even if the client is not home when you get there.
- Consulting with colleagues, providers, other case managers, or supervisors regarding TCM cases.
- Consulting with the beneficiary's family or other social support system regarding TCM needs.
- Making telephone calls to or receiving telephone calls from TCM clients regarding any aspect of their case management needs.
- Completing and reviewing all TCM-related documentation, including TCM encounter logs.
- Conducting or receiving training related to providing TCM services, including how to implement the TCM program and conduct the time surveys. Training may be conducted individually or in groups. It could also include preparing or studying TCM instructional materials, protocols, or forms.
- Supervising case managers in the performance of the case manager's TCM duties.

Linkage and Consultation

- Researching, coordinating, or improving access to referral resources for TCM clients. This may include meeting with other provider agencies individually or in groups.
- Coordinating between agencies or meeting with teams regarding TCM cases.

 Telephoning a referral provider or the TCM client to ensure that the client is receiving services. Requesting information from a referral provider regarding the outcome of the referral.

Assistance with Accessing the Services

- Making telephone calls to or receiving calls from TCM clients or providers regarding referrals.
- Arranging appointments for referral services for TCM clients or case manager visits with TCM clients.
- Arranging transportation for a TCM client to medical, social, educational, and other services.
- Transporting or accompanying a TCM client only if the TCM case manager is performing case management functions while enroute to medical, social, educational, and other services.
- Arranging for translation services and/or providing translation as part of the TCM service.
- Discussing contracts/agreements with facilities and informing facilities of their obligations to beneficiaries.

Crisis Assistance Planning

 Evaluating, coordinating, and arranging for immediate services or treatment to address a crisis situation.

NOTE: For Outpatient Clinic target populations, crisis assistance planning only applies evaluating, coordinating, and arranging for <u>non-medical</u> services and treatment.

TCM Program Planning and Policy Development

- Planning to increase TCM system capacity and to close gaps in services.
- Interagency coordination to improve TCM service delivery.
- Developing policies and protocols for TCM. Developing TCM resource directories.

IMPLICATIONS FOR THE TCM TIME SURVEY

Staff who only perform TCM Coordination and Claims Administration are <u>not required</u> to time-survey. However, the Time Survey can be used as a tool to support the percentage of time that is certified as being spent on these activities.

Staff who perform TCM Coordination and Claims Administration and also perform other TCM must time-survey.

EXAMPLES OF MAA/TCM COORDINATION ACTIVITIES

- Ensuring that TCM Provider Agreements are properly executed.
- Developing protocols for implementation of TCM at the local level.
- Providing TCM-related training.
- Responding to requests for information regarding the TCM program.
- Reviewing and compiling the results of MAA/TCM time surveys.
- Ensuring compliance with TCM case manager documentation.
- Ensuring compliance with TCM "free care" and TPL policies.
- Maintaining TCM audit files.
- Monitoring Medi-Cal TCM provider agency capability and availability.

EXAMPLES OF MAA/TCM CLAIMS ADMINISTRATION ACTIVITIES

- Preparing TCM Cost Reports.
- Inputting Medi-Cal data from the TCM encounter logs into the data collection system.
- Reconciling TCM Medi-Cal encounter claims.
- Maintaining and analyzing Medi-Cal TCM management information systems.
- Ensuring that TCM claims are submitted by the required due dates.

HOW TO CODE EXERCISE INSTRUCTIONS

OVERVIEW

The purpose of the "How to Code Exercise" is to generate discussion of the types of activities performed and to ensure consistency in how these activities are coded. As each local program is unique, jurisdictions are advised to conduct a similar exercise as part of local time survey training. Training participants should create a list of activities applicable to their specific claiming unit and/or program.

The <u>primary purpose</u> of the activity should be coming to understand the underlying principle in determining how to code.

Examples:

TCM: If a Public Health Nurse (PHN) makes a home visit to conduct a TCM Assessment, the time spent may be coded to TCM even if on that visit the PHN spends a small amount of time responding to a client's question about a child's rash. If the purpose of the visit is to conduct a TCM Assessment and to provide education about nutrition, the PHN must code her time proportionally between TCM and Other Programs/Activities.

EXERCISE INSTRUCTIONS

There are two columns in which codes may be entered on the How to Code Exercise Form. Persons who will be using the MAA Time Survey Form are to use the MAA column. Persons who will be using the TCM Time Survey Form are to use the TCM column. Use the letters below to code the exercise form.

In several cases, the sample activities, as described, should be coded to more than one time survey activity. There are two reasons for this. First, the time spent on some activities must be pro-rated, as there is more than one purpose for the activity. Second, some activities may be coded to TCM by a case manager if the client is considered a TCM client or to another code if the activity is not part of a TCM service. Note that if the primary purpose of the contact is TCM-related, DHS allows coding of the contact to TCM, even if a brief amount of time is spent on other "incidental" activities.

CODING LETTERS

C= Facilitating Medi-Cal Application J = Direct Patient Care
D= MAA Transportation K = General Administration

E= Contract Administration L = Paid Time Off

F= MAA/TCM Coordination/Claims Administration

G= MAA Implementation Training

MAA AND TCM TIME SURVEYS - HOW TO CODE EXERCISE

For each sample activity, fill in the Activity Code Letter(s) in the appropriate MAA or TCM column, and state the reason for your choice.

SAMPLE ACTIVITY	MAA	TCM	REASON
 A PHN does daily DOT visits to a high-risk family with multiple problems. On Tuesda and Thursday, the visit includes follow-up on the TCM service plan and further assessments. 	у		
Charting and reading in preparation for home visits with Medi-Cal and non-Medi-Cal clients who are considered TCM-enrolled			
3. Developing a presentation for a group of women enrolled in WIC programs who are wanting to limit future births and who need help with resources such as obtaining foo stamps, budgeting, learning about nutrition, and registering to vote.	d		
 A PHN does a DOT visit to a high-risk family with multiple problems. The visit includes checking an infant for diaper rash and teaching Mom to use covers on electrical outlets. 			
A social worker helps a Medi-Cal client prepare the paperwork necessary to establish continuing eligibility for Medi-Cal.			
6. A health educator answers phones during a call-in period and makes referrals to Medi-Cal, Clinics, Food Stamps, and Mental Health outpatient services.			
7. A health educator and a PHN collaborate for six hours on writing campaign materials on CPSP targeted to zip codes with high Medi-Cal rates and single-parent families.			
8. A health educator and translator spend four hours in a Laundromat talking with Lating women about HIV, birth control, well-baby clinics, and how to get on Medi-Cal.	0		

SAMPLE ACTIVITY	MAA	тсм	REASON
9. An outreach worker goes door-to-door for eight hours in a low-income neighborhood that has a high rate of Medi-Cal residents and delivers pamphlets about school drop-in centers, Medi-Cal application centers, and the risks of teenage sex.			
10.A PHN case manager visits a home on referral and assesses that the individual is in need of medical care for prevention (immunization, pap smear) and/or treatment of an illness. The PHN teaches the client about the need for medical care, screens and determines that the individual will probably be eligible for Medi-Cal, gives information on how to apply for Medi-Cal, and gives the client a list of Medi-Cal providers.			
11. An individual comes to the Public Health Center, and an interview indicates that this person has symptoms of a medical condition in need of diagnosis and treatment. The individual is determined to be eligible for Medi-Cal and is given information on the need for care, how to apply for Medi-Cal, and a list of providers.			
12.A social service aide is doing TB source case finding and educates the family about the need for immunization, well-child care, and other preventive services. The Social Service Aide also refers the family to Medi-Cal and gives a list of providers.			
13.A PHN gives a group presentation to women of childbearing age. She discusses the need for medical care and gives some education on communicable diseases and Medi-Cal in general.			
14.A PHN gives a group presentation to substance-abusing mothers, including the need for medical care, pap smears, family planning, well-child care, and immunizations. She also tells the group about available Medi-Cal providers and how to seek care.			
15. Staff are trained to complete the TCM time survey forms.			
16. Staff are trained to complete the MAA time survey forms.			
17. Supervisors review and sign the MAA or TCM time survey forms.			

SAMPLE ACTIVITY	MAA	ТСМ	REASON
18. Time survey forms are analyzed and the data is summarized at the program level prior to preparing claims. Supervisors and their clerical staff complete this task.			
19. Staff member takes a 15-minute break.			
20.TCM Case Manager attends a TCM Task Force meeting about TCM policies and procedures.			
21.TCM Case Manager helps a client develop a monthly budget and assess the client's need for further budget management and spending oversight.			
22. Staff attend a training on earthquake preparedness.			
23. Staff member gives blood for a County Blood Drive.			
24. Staff member coordinates with a Medi-Cal provider to make sure that services are available in Spanish.			
25. Staff member works eight hours on a holiday and is paid double time.			
26. TCM case manager discusses with the conservatee's family members whether to maintain life support.			
27. As part of an outreach campaign to promote immunizations, individuals are given referrals to Medi-Cal eligibility offices and Medi-Cal services.			
28. An advice nurse does referrals to Medi-Cal eligibility offices and Medi-Cal services as part of her job.			
29. An outreach campaign targets pregnant women and refers those without medical care to a CPSP provider.			
30. An outreach van travels to various locations and refers clients to Medi-Cal eligibility offices and Medi-Cal services.			

SAMPLE ACTIVITY	MAA	TCM	REASON
31. Staff attend a workshop on changes in MAA codes.			
32.A health educator conducts a class at a community center on how to complete Medi-Cal forms.			
33.A translator accompanies a case manager on a home visit.			
34.A community worker develops a list of Spanish speaking providers for the case manager.			
35.A TCM case manager meets with a job training program regarding eligibility requirements for the job training program.			
36.A Medi-Cal Outreach Worker is out-posted to family planning and immunization clinics.			
37.A community health aide makes a home visit on referral from the maternity clinic to "see what the Health Department can do" since the client does not currently have Medi-Cal or insurance.			
38.A community health worker participates in a health fair to discuss Medi-Cal eligibility.			
39.A PHN contacts potential CCS clients to talk about the CCS program and the clients' eligibility for it.			
40. An intake nurse at an immunization clinic screens clients for Medi-Cal eligibility.			
41. An outreach worker distributes DHS pamphlets in a low-income neighborhood. The pamphlet includes information on Medi-Cal application and services.			
42.A case manager's assistant gathers and mails "support group" information to a TCM client.			

MAA/TCM TIME SURVEY HOW TO CODE EXERCISE - ANSWER KEY

For each sample activity on the How to Code Exercise form there may be codes in the MAA column (for persons completing the MAA Time Survey form) and/or in the TCM column (for persons completing the TCM Time Survey form).

There may be more than one code in the MAA column and/or the TCM column for two reasons:

- 1. The time spent on the sample activity must be pro-rated between two time survey activity codes because the activity description includes both claimable and non-claimable components.
- 2. The coding depends on the primary purpose of the activity or on the context in which the activity is performed.

B = Medi-Cal Outreach B1 or B2 I = Other Programs/Activities

C = Facilitating Medi-Cal Application J = Direct Patient Care
D = MAA Transportation K = General Administration

E = Contract Administration L = Paid Time Off

F = MAA/TCM Coordination/Claims Administration

G = MAA Implementation Training

NOTE: The term "Medi-Cal-covered services" means those health services that can be reimbursed through Medi-Cal. For Outreach A, this means referring a Medi-Cal-eligible person to a Medi-Cal provider for one or more of these services. For Outreach B, this means referring any person for one or more of these services, even if the person is not a Medi-Cal eligible and the provider is not a Medi-Cal provider. A list of Medi-Cal-covered services is included in Section I of the DHS Training Manual, August 1995.

Activity #	MAA	TCM	Reason
1	J	H, J	On the days that TCM services are provided, time spent on those services may be coded to TCM. DOT is Direct Patient Care.
2	I	Н	
3	I, A or B	I, A or B	This is primarily an educational activity. However, if a portion of the presentation involves encouraging/referring the participants to apply for Medi-Cal and/or use Medi-Cal services, that portion may be coded to Outreach A. If a portion of the presentation involves encouraging/referring participants to use Medi-Cal covered health services, without encouraging the participants to apply for Medi-Cal, that portion may be coded to Outreach B.
4	l or J	l or J	
5	С	С	This does not involve the actual eligibility determination.
6	I, A or B	I, A or B	If the time spent specifically referring for Medi-Cal eligibility or referring Medi-Cal clients to Medi-Cal covered services can be isolated, that portion can be coded to Outreach A. If the caller is not identified as Medi-Cal eligible, referral to Medi-Cal covered services can be coded to Outreach B. Time spent referring to services, such as Food Stamps, that are not covered by Medi-Cal is to be coded to Other Programs/Activities.
7	В	В	The campaign materials are assumed to include information on accessing health services related to CPSP.
8	A, I	A, I	The portion of this activity devoted to bringing persons into Medi-Cal services may be coded to Outreach A. The portion that is strictly educational must to be coded to Other Programs/Activities.
9	A, I	A, I	The portion of this activity related to bringing persons into Medi-Cal services may be coded to Outreach A. The remainder appears to be education and must be coded to Other Programs/Activities.

Activity #	MAA	TCM	Reason
10	A, I	A, H	If the individual is not part of a TCM target population, the portion of the visit related to bringing persons into Medi-Cal services may be coded to Outreach A.
			If the individual is a member of a TCM target population, and the PHN meets the definition of a case manager for the same target population, the visit may be coded to TCM.
11	A, J	A, J	The intent of this interview must be to bring the person into Medi-Cal services. If this interview is in a clinic setting, the portion related to assessing the need for medical treatment must be coded to Direct Patient Care.
12	A, I	A, I	The portion related to referring the family to Medi-Cal may be coded to Outreach A. The remainder related to TB source case finding must be coded to Other Programs/Activities.
13	B, I	B, I	If the intent of the presentation is outreach for bringing persons into Medi-Cal-covered health services, the entire time may be coded to Outreach B. If a significant portion is education, the time must be prorated between Outreach B and Other Programs/Activities.
14	B, I	B, I	If the intent of the presentation is outreach for bringing persons into Medi-Cal-covered health services, the entire time may be coded to Outreach B. If a significant portion is education, the time must be prorated between Outreach B and Other Programs/Activities.
15	F	H, F	TCM staff would code to TCM. If the person conducting the training is a MAA/TCM Coordinator, her/his time would be coded to MAA/TCM Coordination.
16	G	G	
17	F	Н	
18	F	F	
19	K	K	
20		Н	

Activity #	MAA	TCM	Reason
21		H, I	The portion of the time spent teaching the client to develop a budget is to be coded to Other Programs/Activities. The portion of time assessing the client's need for and providing referrals to budget management resources can be coded to TCM.
			NOTE: For Public Guardian clients, TCM specifically excludes activities related to money management.
22	K	K	
23	l or L	I or L	If the employee is given time during the paid workday to do this, code to Other Programs/Activities. If the employee is required to take time off to do this, code to Paid Time Off.
24	Α	A, H	If this activity involves updating referral resources for outreach purposes, this activity may be coded to Outreach A. If this activity is performed relative to developing referrals for TCM clients, this activity is coded to TCM.
25	K*	K*	* If these hours are treated as earned "comp time," code to General Administration. If these hours are paid hours, code to the activity performed.
26		Jorl	TCM is defined as "services which assist a Medi-Cal eligible individual in a defined target population to gain access to needed medical, social, educational, and other services." Discussion with an individual's family about whether or not to maintain life support is not TCM. The fact that the individual is already on life support would indicate that access to needed medical services has already been provided. Therefore, such discussion would be coded as Direct Patient Care or Other Programs/Activities.
27	Α	Α	
28	A, I	A, I	The portion of this activity that solely involves referrals to Medi-Cal eligibility and Medi-Cal services can be coded to Outreach A. Referrals to services not covered by Medi-Cal and general medical advice is to be coded to Other Programs/Activities.
29	В	В	
30	Α	Α	The intent of this outreach must be to bring persons into Medi-Cal services.

Activity #	MAA	TCM	Reason
31	G	G	
32	С	С	
33		Н	Assumes that this is a TCM visit.
34		Н	
35		Н	Must relate to meeting the case management needs of TCM clients.
36	Α	А	It is assumed that the role of the Medi-Cal Outreach Worker is to bring persons into Medi-Cal services.
37	A or B	A or B	The coding depends on the focus of the visit. If emphasis is placed on applying for Medi-Cal, the time may be coded to Outreach A.
38	Α	Α	
39	В	В	CCS covers both Medi-Cal and non-Medi-Cal clients.
40	I, C	I, C	If this activity is a brief and routine part of clinic intake, it is coded to Other Programs/Activities. If this activity goes beyond clinic intake and involves assisting the client to apply for Medi-Cal, it may be coded to Facilitating Medi-Cal Application.
41	Α	Α	
42		Н	